

NOV 09 2004

PATENT & TRADEMARK OFFICE

FEE TRANSMITTAL

MAIL STOP Amendment

Complete If Known

Application No.	10/005,483
Filing Date	11/09/2001
First Named Inventor	James L. SNELL <i>et al</i>
Examiner Name	Shuwang Liu
Group Art Unit	2634

Total Amount Of Payment (\$) **430.00**

Attorney Docket No. 56162.000489

METHOD OF PAYMENT (check one)

FEE CALCULATION (continued)

1. ☐ The Commissioner for Patents is hereby authorized to charge indicated fees and credit any over payments to **Deposit Account No. 50-0206** in the name of Hunton & Williams LLP.

3. ADDITIONAL FEES

Fee Description	Fee Paid
<input type="checkbox"/> Surcharge - late filing fee or oath	\$
<input type="checkbox"/> Surcharge - late provisional filing fee or cover sheet	\$
<input checked="" type="checkbox"/> Two (2) Month Extension of Time	\$ 430.00
<input type="checkbox"/> Notice of Appeal	\$
<input type="checkbox"/> Filing Brief in Support of Appeal	\$
<input type="checkbox"/> Request for Oral Hearing	\$
<input type="checkbox"/> Utility Issue Fee (or Reissue) (including Publication Fee, if necessary)	\$
<input type="checkbox"/> Design Issue Fee	\$
<input type="checkbox"/> Plant Issue Fee	\$
<input type="checkbox"/> Petition to Commissioner	\$
<input type="checkbox"/> Petition to Revive (Unavoidable)	\$
<input type="checkbox"/> Petition to Revive (Unintentional)	\$
<input type="checkbox"/> Petitions Related to Provisional Applications	\$
<input type="checkbox"/> Submission of Information Disclosure Statement	\$
<input type="checkbox"/> Filing Submission After Final Rejection	\$
<input type="checkbox"/> Recording Each Patent Assignment Per Property	\$
<input type="checkbox"/> Filing Request for Reexamination	\$
<input type="checkbox"/> Other (specify) _____	\$

2. ☒ Check Enclosed. The Commissioner for Patents is hereby authorized to charge any variance between the amount enclosed and the Patent Office charges to **Deposit Account No. 50-0206** in the name of Hunton & Williams LLP, 1900 K Street, N.W., Suite 1200, Washington, D.C. 20006-1109.

FEE CALCULATION

1. BASIC FILING FEE ☒ Large Entity ☐ Small Entity

FEE PAID

Utility Filing Fee	\$
Design Filing Fee	\$
Plant Filing Fee	\$
Reissue Filing Fee	\$
Provisional Filing Fee	\$

2. EXTRA CLAIMS FEES

CLAIMS AS AMENDED

For	Number Present	Highest Number Paid For	Extra	Rate		Amount
				Large Entity	Small Entity	
TOTAL CLAIMS		20	0	x \$ 18.00	x \$ 9.00	\$ 0.00
INDEPENDENT CLAIMS		3	0	x \$ 88.00	x \$ 44.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS				\$ 300.00	\$ 150.00	\$ 0.00
TOTAL EXTRA CLAIMS FEES						\$ 0.00

SUBMITTED BY

Complete (if applicable)

Typed or Printed Name Kevin T. Duncan

Registration No. 41,495

Signature

Date

November 9, 2004



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Attorney Docket No.: 56162.000489																								
In re Application Of	James Leroy SNELL <i>et al</i>																									
Application Number	10/005,483																									
Filed	November 9, 2001																									
For	HIGH DATA RATE SPREAD SPECTRUM TRANSCEIVER AND ASSOCIATED METHODS																									
Group Art Unit	2634																									
Examiner	Shuwang Liu																									
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above-identified application.</p> <p>The requested extension and appropriate fee is as follows:</p> <table border="0" style="width: 100%; margin-top: 10px;"><thead><tr><th></th><th style="text-align: center;">Large Entity</th><th style="text-align: center;">Small Entity</th><th style="text-align: center;">Amount</th></tr></thead><tbody><tr><td><input type="checkbox"/> One Month</td><td style="text-align: center;">\$ 110.00</td><td style="text-align: center;">\$ 55.00</td><td style="text-align: center;">\$</td></tr><tr><td><input checked="" type="checkbox"/> Two Month</td><td style="text-align: center;">\$ 430.00</td><td style="text-align: center;">\$ 215.00</td><td style="text-align: center;">\$430.00</td></tr><tr><td><input type="checkbox"/> Three Month</td><td style="text-align: center;">\$ 980.00</td><td style="text-align: center;">\$ 490.00</td><td style="text-align: center;">\$</td></tr><tr><td><input type="checkbox"/> Four Month</td><td style="text-align: center;">\$1530.00</td><td style="text-align: center;">\$ 765.00</td><td style="text-align: center;">\$</td></tr><tr><td><input type="checkbox"/> Five Month</td><td style="text-align: center;">\$2080.00</td><td style="text-align: center;">\$1040.00</td><td style="text-align: center;">\$</td></tr></tbody></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0206.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71</p> <p style="padding-left: 40px;">Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).;</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</p> <p style="padding-left: 40px;">Registration number if acting under 37 CFR 1.34(a). _____</p>				Large Entity	Small Entity	Amount	<input type="checkbox"/> One Month	\$ 110.00	\$ 55.00	\$	<input checked="" type="checkbox"/> Two Month	\$ 430.00	\$ 215.00	\$430.00	<input type="checkbox"/> Three Month	\$ 980.00	\$ 490.00	\$	<input type="checkbox"/> Four Month	\$1530.00	\$ 765.00	\$	<input type="checkbox"/> Five Month	\$2080.00	\$1040.00	\$
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<p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <table border="0" style="width: 100%; margin-top: 10px;"><tr><td style="width: 40%; border-bottom: 1px solid black; text-align: center;">November 9, 2004</td><td style="width: 60%; border-bottom: 1px solid black; text-align: center;"></td></tr><tr><td style="text-align: center;">Date</td><td style="text-align: center;">Signature</td></tr></table> <div style="margin-top: 10px;"><div style="display: flex; justify-content: space-between;"><div style="width: 40%;">11/10/2004 HGUTEMR1 00000015 10005483 01 FC:1252</div><div style="width: 50%; text-align: center;">Kevin T. Duncan _____ Typed or Printed Name</div></div><div style="margin-top: 10px; text-align: center;">41,495 _____ Registration Number (if applicable)</div></div>			November 9, 2004		Date	Signature																				
November 9, 2004																										
Date	Signature																									
<p>Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p> <p><input checked="" type="checkbox"/> *Total of _____ form(s) is/are submitted.</p>																										